

NICE guidelines presented for management of thyroid disease

4 March 2020



recommended, and liothyronine (alone or in combination with levothyroxine) is not routinely recommended. When treating primary hypothyroidism with levothyroxine, thyroid stimulating [hormone levels](#) should be maintained within the reference range. For thyrotoxicosis with hyperthyroidism, radioactive iodine is recommended as first-line treatment, unless antithyroid drugs are likely to achieve remission or it is unsuitable.

"There has been uncertainty in the U.K. about the [best treatment](#) for hyperthyroidism despite [radioactive iodine](#) being the most common first-line treatment for this condition in the U.S.," a coauthor said in a statement. "We are very pleased to have been able to work with NICE to provide clear new guidance which we hope will improve outcomes for patients with this condition."

In a summary of a recent guideline from the National Institute for Health and Care Excellence (NICE), published online Jan. 29 in *The BMJ*, recommendations are presented for the assessment and management of thyroid disease.

In the summary, Melina Vasileiou, from the Royal College of Physicians in London, and colleagues present some of the most recent NICE recommendations on thyroid disease assessment and management, which are based on systematic reviews of the best available clinical evidence.

According to the authors, for [adults](#) younger than 65 years with [primary hypothyroidism](#) and no history of cardiovascular disease, a starting levothyroxine dose of 1.6 µg/kg/day (rounded to the nearest 25 µg) is recommended. For adults aged 65 years and older and adults with a history of cardiovascular disease, a starting levothyroxine dose of 25 to 50 µg/day with titration is recommended. For treatment of primary hypothyroidism, natural thyroid extract is not

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